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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/652,753	08/28/2003	Lianjun An	POU920030040US1	1762
7590 06/04/2007 Philmore H. Colburn II			EXAMINER	
Cantor Colburn			CHANNAVAJJALA, SRIRAMA T	
55 Griffin Road South Bloomfield, CT 06002			ART UNIT	PAPER NUMBER
ŕ			2166	
			MAIL DATE	DELIVERY MODE
			06/04/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

	Application No.	Applicant(s)			
Interview Summary	10/652,753	AN ET AL.			
morrow caninaly	Examiner	Art Unit			
	Srirama Channavajjala	2166			
All participants (applicant, applicant's representative, PTO personnel):					
(1) Srirama Channavajjala.	(3)				
(2) <u>Sean F. Sullivan, Re.No. 38,328</u> .	(3)				
Date of Interview: <u>3\\$\oldot</u> ?	•				
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representative	e]			
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.				
Claim(s) discussed:					
Identification of prior art discussed:					
Agreement with respect to the claims f)☐ was reached. o	g) was not reached. h) N	I/A.			
Substance of Interview including description of the general reached, or any other comments: <u>Discussed provisional of co-pending application 10/652;963 and 10/648,685. Applied disclaimer</u> .	oviousness-type "Double Pater	nt" issue with respect to			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w	reed would render the claims yould render the claims			
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.					
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Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's sign	ature, if required			